## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No.

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

STATIONARY BOARD FOR BLOCKING LIGHTS OF ONCOMING VEHICLES IN MEDIAL STRIP AND FACILITATING NIGHTTIME IDENTIFICATION OF MEDIAL STRIP

the spec	cification of which (check of	only one item below)
	[X] is attached hereto	
	[] was filed as United Sta	ates application
	Serial No.	
	on	
	and was amended	
	on (if applicable).	
	[] was filed as PCT inter	national application
	Number	
	on	
	and was amended under I	PCT Article 19
	on	(if applicable).
	at I have reviewed and under amendment specifically ref	erstand the contents of the above-identified specification, including the claims, as ferred to above.
continuation-in-	part applications, material	ation which is material to patentability as defined in 37 CFR 1.56, including for information which became available between the filing date of the prior application g date of the continuation-in-part application.
inventor's or pla country other the foreign applicati	int breeder's rights certific an the United States of An on for patent, inventor's c	der 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, cate(s), or 365(a) of any PCT international application which designated at least one nerica, listed below and have also identified below, by checking the box, any or plant breeder's rights certificate(s), or any PCT international application having an which priority is claimed.

PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:						
Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority Claimed Under 35 U.S.C. 119			
JAPAN	2003-90078	28, 03, 2003	X) YES	[] NO		
			[]YES	[] NO		
			[] YES	[] NO		
			[] YES	[] NO		
			[]YES	[] NO		
			[]YES	[] NO		
			[]YES	[] NO		

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No.

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at *Cohen, Pontani, Lieberman & Pavane* to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

## Customer number 27799

Send correspondence to *Cohen, Pontani, Lieberman & Pavane* at the address for the following customer Number: 27799

Direct Telephone calls to: (name and telephone number) Thomas Langer (212) 687-2770

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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	FULL NAME OF INVENTOR	FAMILY NAME HIROTA	FIRST GIVEN NAME Kashichi	SECOND GIVEN NAME
2 0 1	RESIDENCE, CITIZENSHIP	CITY Hachioji-Shi,	STATE OR FOREIGN COUNTRY TOKYO, JAPAN	COUNTRY OF CITIZENSHIP
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2 0 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2 0 4	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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	POST OFFICE ADDRESS	POST OFFICE ADDRESS	СІТҮ	STATE & ZIP CODE/COUNTRY
2 0 5	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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COMBINED DECLARATION FOR (Includes Reference to PCT International Computational Comput	Attorney's Docket No.			
SIGNATURE OF INVENTOR 20	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203		
June 10, 2003	DATE	DATE	DATE	
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206		
DATE	DAŤE	DATE		
Additional	inventor(s) name(s) & address(es) a	ttached? [] Yes	[ <sup>X</sup> ] No	